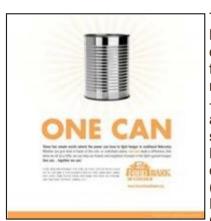


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## State Campaign Against Hunger April 5-16, 2010

You recently received an e-mail from HR regarding the State Campaign Against Hunger. Go to Inside NDE for more information about prizes, team rosters, and shopping lists.

This initiative is a part of the largest food drive the Food Bank organizes. In 2009 the State gathered 19,901 pounds of food and \$24,713.02 in cash. Thanks again to all who participated last year!



The Food n k а distributes food to network of non -profit agencies in 16 southeastern Nebraska counties (Butler, Fillmore, G age,

Jefferson, Johnson, Lancaster, Nemaha, Otoe, Pawnee, Polk, Richardson, Saline, Saunders, Seward, Thayer, York). All of these agencies distribute food free of charge to people in need.

Consider a cash donation. The Food Bank can turn 31 cents into a pound of food. That means they can feed one person for \$1.08 per day or \$7.75 for a week; a \$31 donation can feed a family of four for a week.

Open Enrollment
April 19, 2010
to
May 14, 2010

# Open Enrollment General Information

Open enrollment for the July 1, 2010-June 30 2011 plan year begins on April 19, 2010 at 7:00 a.m. CT and concludes on May 14, 2010 at 5:00 p.m. CT.

Open enrollment meetings will be made available via "live presentations" and via webinar as arranged by your computer network administrator. Click here for the open enrollment meeting schedule.

State Personnel will not be providing print copies of the *Options Enrollment Guide*. Click here to access the <u>online version</u>. NDE will provide each employee a printed fourpage document that will include an overview of plan changes, plan rates and the health plan comparison chart.

See pages 2-5 of this newsletter for highlights of the benefit offerings for 2010-11. For more detailed information, visit the Employee Wellness and Benefits website.

## 2010 Open Enrollment



## Medical/Health Coverage

### What's New

- Plan/lifetime benefit maximums are now unlimited for all four plans.
- Changes to outpatient mental health and substance abuse treatment copays and co-insurances.
- Serious mental illness will be treated as any other illness (not listed in chart this year).
- Wellness Plan
  - ♦ No copay for maternity office visits after initial.
  - ♦ No copay for ambulance.
  - Urgent care copay for in-network services reduced from \$40 to \$25.
  - Diabetes—No copay for A1C lab tests (2 per plan year). No copay for foot exam in conjunction with office visit.
  - ♦ New wellness program option added.
  - Condition management program will require 4 coaching calls rather than 3.

### What's Not

 The same four BCBS plans are offered with the same deductibles and out-ofpocket maximums

## Plan Rate Increases/Decreases

The State of Nebraska is self-insured, which means that employee premium dollars are used to pay claims. The health insurance rates are adjusted accordingly.

High Deductible PPO -18.3%
Wellness PPO - 6.3%
Regular PPO 0.0%
Blue Choice + 9.7%

# Prescription EXPRESS SCRIPTS\* Drugs

## What's New

If you are currently taking a specialty medication, you will be able to get the first

two fills at a retail pharmacy but then remaining refills must be filled through CuraScript, a specialty mail order division of Express Scripts. If a new specialty medication is prescribed, you will be able to get the initial prescription filled at a retail pharmacy. However, all future prescriptions will need to go through CuraScript.

- The link to the list of specialty medications will be sent as soon as it is available. (Express Scripts user name and password will be required.)
- A one-time \$0 Generic Copay Holiday will be available for those taking targeted name brand drugs and switching to generics. The incentive is one-time only per drug, and applies only to specific name brand drugs. Express Scripts will notify individuals of their eligibility to participate. Those who are currently taking generic drugs will not qualify for this special offer.
- Two new drug benefits are available for those who enroll in the <u>Wellness PPO</u> <u>plan</u>:
  - 1. No copay for prescriptions for hypertension and high cholesterol. This applies to both a 30-day or
    - 180-day supply of qualified drugs.
  - With prior approval, participants may receive one course of tobacco cessation prescription drugs for up to twelve weeks, within a rolling twelve month period, at no cost. There is a lifetime limit of three courses of treatment.

## What's Not

- Express Scripts continues as the vendor.
- Copays for generic, preferred (formulary) and non-preferred (non-formulary) remain the same.

## Open Enrollment—Continued

## **Dental Benefits**



#### What's New

 During this open enrollment period, you may enroll in the dental plan, or change from the basic to premium plan, with NO waiting period for benefits. Historically, if employees do not elect dental coverage



as new hires, and elect to enroll in the dental coverage during any subsequent open enrollment period, they would be considered late entrants.

- Two tiers of plans will now be available basic and premium.
- The new premium plan offers:
  - A \$1500 maximum benefit for both PPO and Non-PPO providers (basic plan-\$1000);
  - 80% coverage for preventative and basic procedures from Non-PPO providers (basic plan-50%);
  - 50% coverage for major procedures and orthodontia/TMJ from Non-PPO providers (basic plan-25%); and,
  - Orthodontia and TMJ services for adults (over 19).
- Receive an additional \$100 in Dental Rewards if you use a PPO dentist.

## What's Not

- Ameritas continues as the vendor.
- Basic Plan coverage remains the same.
- Dental rewards will work in the same manner for both the basic and premium plans.
- New ID cards will be sent only if you are new to the plan or if there has been a change.

## **Estimated Dental Plan Cost After Tax Savings**

		Est. Cost After
Basic Plan	<b>Full Cost</b>	Tax Savings*
Employee Only	\$21.16	\$14.81
Employee & Spouse	\$42.36	\$29.65
Employee & Child(ren)	\$61.04	\$42.73
Emp., Spouse & Child(ren)	\$66.32	\$46.42

### **Est. Cost After**

Premium Plan	<b>Full Cost</b>	Tax Savings*
Employee Only	\$23.68	\$ 16.58
Employee & Spouse	\$47.40	\$33.18
Employee & Child(ren)	\$68.32	\$47.82
Emp., Spouse & Child(ren)	\$74.24	\$51.97

<sup>\*</sup>Based on a 30% tax savings including federal, state, and FICA taxes.

## Vision Care Benefits



### What's New

- EyeMed replaces VSP as the vendor.
- Rates decreased!
- Plan benefits have been enhanced.
  - Standard contact lens fit and 2 follow-up visits after \$55 copay
  - 10% savings on premium contact lens fit and follow-up
  - ♦ Dedicated allowance for contact lens materials
  - Standard progressive lenses covered in full after \$75 copay
  - ♦ Discounted premium progressive lenses
  - Discounted lens options (i.e., UV, tint, coating, polycarb, anti-reflective)
  - Additional prescription eyeglasses 40% off complete pair
- Expanded Access Network will include private practitioners as well as leading retailers, such as LensCrafters, Pearle Vision, Sears Optical, Target Optical and JC Penney Optical. (Wal-Mart Optical is not in the network.) You may nominate providers to participate in the network.
- ID cards *will be* issued. Additional copies may be requested online.

### What's Not

Choice of two plans (basic & premium) continues.

## Open Enrollment—Continued

## Flexible Spending Accounts



## What's New

- Due to federal legislation, over-thecounter medications (e.g., Prevacid, Claritin) will not be eligible for health care reimbursement unless you have a prescription for the drug, beginning January 1, 2011.
- The health care reimbursement will be capped at \$2,500 in 2013. The maximum is currently \$3000 per plan year.

### What's Not

- The dependent care maximum will stay at \$5000 per year.
- You must re-enroll in the plan each year due to federal requirements.

Consider this: The average family spent \$1,500 in 2009 on out-of-pocket medical expenses. You may save up to 30% by not having to pay federal, state, and FICA taxes on the money set aside from your paycheck each month.

## Life Insurance



### What's New

• Nothing. (Sometimes that's a good thing.)

## What's Not

- Mutual of Omaha continues as the vendor.
- Rates and benefits remain the same.
- \$20,000 in basic life insurance is provided at no cost to you.
- Remember, you can increase your supplemental life insurance by one increment without providing evidence of insurability.
- Changes to life insurance coverage must be made on paper rather than online.



## **Counseling Services**

#### What's New

No plan changes.

#### What's Not

- Best Care EAP continues as the vendor.
- Free counseling services to help you deal with issues affecting your job performance or personal well-being.
- You may receive up to 5 counseling sessions, per incident, per year.
- A national network of providers is available if a Best Care office is not available in your community.
- If you are referred to a provider outside of the Best Care EAP network, you are responsible for the payment of the associated service fees.
- To access the Best Care website, click on the "employee" tab. The username is bcnee and the password is ne.

## Long-Term Disability



## What's New

Nothing.

### What's Not

No changes to plan offerings or rates.

### REMEMBER...

NIS is now found on the EnterpriseOne portal at:  $\frac{http://edge.\,ne.\,gov/}{}$ 

Save this address as a favorite!

Make sure that your password is active. If it is inactive, or you cannot remember it, go to the Edge and click on the <a href="forgot password">forgot password</a> link in the upper left corner of the page.

## **BCBS Wellness PPO Plan**

The Blue Choice plan is currently the most popular, with about 8,000 employees enrolled. If an employee moved from Blue Choice to Wellness, (s)he would save about \$70 in premiums across one year on a single plan and about \$250 on a family plan. Remember, employees must meet the eligibility criteria in order to enroll or maintain enrollment in the Wellness PPO plan. See the eligibility requirements listed below.

## **Plan Eligibility Requirements**

## Current Wellness PPO plan members — To qualify for enrollment for 2010-11

- 1. Employee must have already completed one of the qualified wellness programs;
- 2. Employee (and spouse if applicable) complete one of the biometric screening options between April 1 through May 31;
  - Onsite screening (Screening locations; Enroll via Wellness Options website);
  - Home kit (mail for analysis no later than April 30, 2010);
  - Alternative Means Screening (Submit required data from a doctor visit that occurred after January 1, 2010. Mail/fax result no later than April 30, 2010.
- 3. Employee (and spouse if applicable) complete the annual Health Assessment between April 1 through May 31.

## Participants & spouses electing/remaining in Wellness PPO for the 2011-12 plan year must:

- 1. Enroll (April-Dec. 2010) and participate in your choice of at least one qualified wellness program. Complete program by March 31, 2011.
- 2. Complete biometric screening (April 1-May 31, 2011 as applicable);
- 3. Complete the Health Assessment (April 1-May 31, 2011).

## **Wellness Programs Expanded**

- A new option called *Feel Like a Million* has been added. Participants will earn virtual dollars on an online game show for recording certain daily activities.
- Lifestyle Management Coaching returns. Work with a coach to support you by selecting from among 13 different focus areas related to physical activity, healthy eating, stress management and smoking cessation. Participants must complete <u>3</u> or more phone calls with a health coach by 3/31/11.
- The Walk This Way walking program is also back. This year, participants must log a minimum of 450,000 steps before March 31, 2011.
- Condition Management Coaching also returns. This program is helpful for individuals with a chronic condition (e.g., heart or respiratory conditions, diabetes, depression, back pain). Work with a coach, in conjunction with your physician, to help manage your health, help you feel better, and enjoy the best quality of life. This service is offered through Nurtur®, Health fitness' condition management partner. Only new Condition Management participants need to enroll before December 31, 2010; current participants can continue calls and do not need to re-enroll. Participants must complete 4 or more coaching phone calls before March 31, 2011.